

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>09/689139</u>	Examiner : <u>Rayford, S</u>	GAU : <u>1772</u>
From: <u>SLC</u>	Location: <u>DC</u> FMF FDC	Date: <u>06-10-05</u>
Tracking #: <u>06090271</u>		Week Date: <u>04-25-05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>12-29-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: ① Improper Dependency: Original claim 32 depends upon canceled original claim 31. Please Resolve. Also, claim 10 original depends upon claim 35 and 23.

Thank you
SLC

[XRUSH] RESPONSE: Supplemental Answer prepared.

INITIALS: SLC

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH. 7-7-05

REV 10/04